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K031654
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3. **510(k) Summary**

Sponsor: Synthes (USA)
1690 Russell Road
Paoli, PA 19301
(610) 647-9700

Device name: Synthes Resorbable Cranial Clamp, (modified)

Classification: Class II, §882.5250 – Burr hole cover
Class II, §882.5360 – Cranioplasty plate fastener

Intended use: Synthes Resorbable Cranial Clamp is intended for covering burr holes and for fixation of cranial bone flaps.

Predicate device: Synthes Resorbable Cranial Clamp
Medtronic INVISx Lock System

Device description: Synthes Resorbable Cranial Clamp consists of two disks connected by a tensioned ratcheting shaft. The clamps fit a range of burr holes and craniotomy gap sizes.

Material: Poly (L/DL-lactide)

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Food and Drug Administration
9200 Corporate Boulevard
Rockville MD 20850

Ms. Bonnie J. Smith
Senior Regulatory Affairs Associate
Synthes (USA)
1690 Russell Road
P.O. Box 1766
Paoli, Pennsylvania 19301

Re: K031654

Trade/Device Name: Synthes Resorbable Cranial Clamp (Modified)
Regulation Number: 21 CFR 882.5250 and 882.5360
Regulation Name: Burr hole cover and Cranioplasty plate fastener
Regulatory Class: II
Product Code: GXR and HBW
Dated: May 23, 2003
Received: May 28, 2003

Dear Ms. Smith:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

Page 2 - Ms. Bonnie J. Smith

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 21 CFR Part 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4659. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address <http://www.fda.gov/cdrh/dsma/dsmamain.html>

Sincerely yours,

Miriam C. Provost
for

Celia M. Witten, Ph.D., M.D.

Director

Division of General, Restorative
and Neurological Devices

Office of Device Evaluation

Center for Devices and

Radiological Health

Enclosure

2. Indications for Use Statement

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510(k) Number (if known): K031654

Device Name: Synthes Resorbable Cranial Clamp, (modified)

Indications for Use: Synthes Resorbable Cranial Clamp is intended for covering burr holes and for fixation of cranial bone flaps.

Miriam C. Provost
(Division Sign-Off)
Division of General, Restorative
and Neurological Devices

510(k) Number K031654

(PLEASE DO NOT WRITE BELOW THIS LINE - CONTINUE ON ANOTHER PAGE IF
NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use h2
(Per 21 CFR 801.109)

OR

Over-The-Counter Use N6

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